

Work Order ID 124051

Monday, September 08, 2014 3:39:47 PM

124051

RUST# Page 1

Item ID: D3859-041

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Wearplate

Start Date: 9/8/2014 Start Qty: 2.00

2

Cust Item ID:

Required Date: 9/9/2014 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: ME Date: 11-9-8

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D3859

B

100

FLOW WATER JET

0.00

100

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg D3859-1

Dwg Rev: B

Prog Rev: B

2-Deburr if necessary

②

DAS
23
9-89

14/09/08

110

QC2- Inspect parts off machine FAI/FAIB

0.00

110

QC

Memo

0.00

Quality Control

②

DAS
23
9-89

14/09/08

120

QC8- Inspect parts - second check

0.00

120

QC

Memo

0.00

Quality Control

2

DAS
38
9-89

14-9-9

Work Order ID 124051***124051***

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Monday, September 08, 2014 3:39:48 PM

Item ID: D3859-041

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Wearplate

Start Date: 9/8/2014 Start Qty: 2.00

2

Cust Item ID:

Required Date: 9/9/2014 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

180

Identify as per dwg & Stock Location: _____

0.00

180

Packaging

Memo

0.00

Packaging

HAI
Bring to
Mel

190

QC21- Final Inspection - Work Order Release

0.00

190

QC

Memo

0.00

Quality Control

14/9/11

HAI
Bring + MF
14-9-11

Picklist Print

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Page 1

Work Order ID: 124051

124051

Parent Item: D3859-041

D3859-041

Parent Item Name: Wearplate

Start Date: 9/8/2014

Required Date: 9/9/2014

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP Rev:A 09-02-03 new issue DD verified by:EC
14.04.30 as per dwg rev.b DD verified by:JLM

IPP Rev:B

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D4379-5		Manufactured	No			130	Each	114.0000	6	12			
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D4379-5

Wearplate Cup

14-09-10
JLM

Location

Loc Qty

Loc Code

WA001

114

117717

27

119451

22

120647

65

12

M304S16GA

Purchased

No

100

sf

537.4570

0.85

2

DAS
23
9-89

DC 14/09/08

M304S16GA

304/316 Sheet .063

Location

Loc Qty

Loc Code

MAT020

358.457

M127821

71.317

M129192

13.54

M129449

273.6

TPI

179

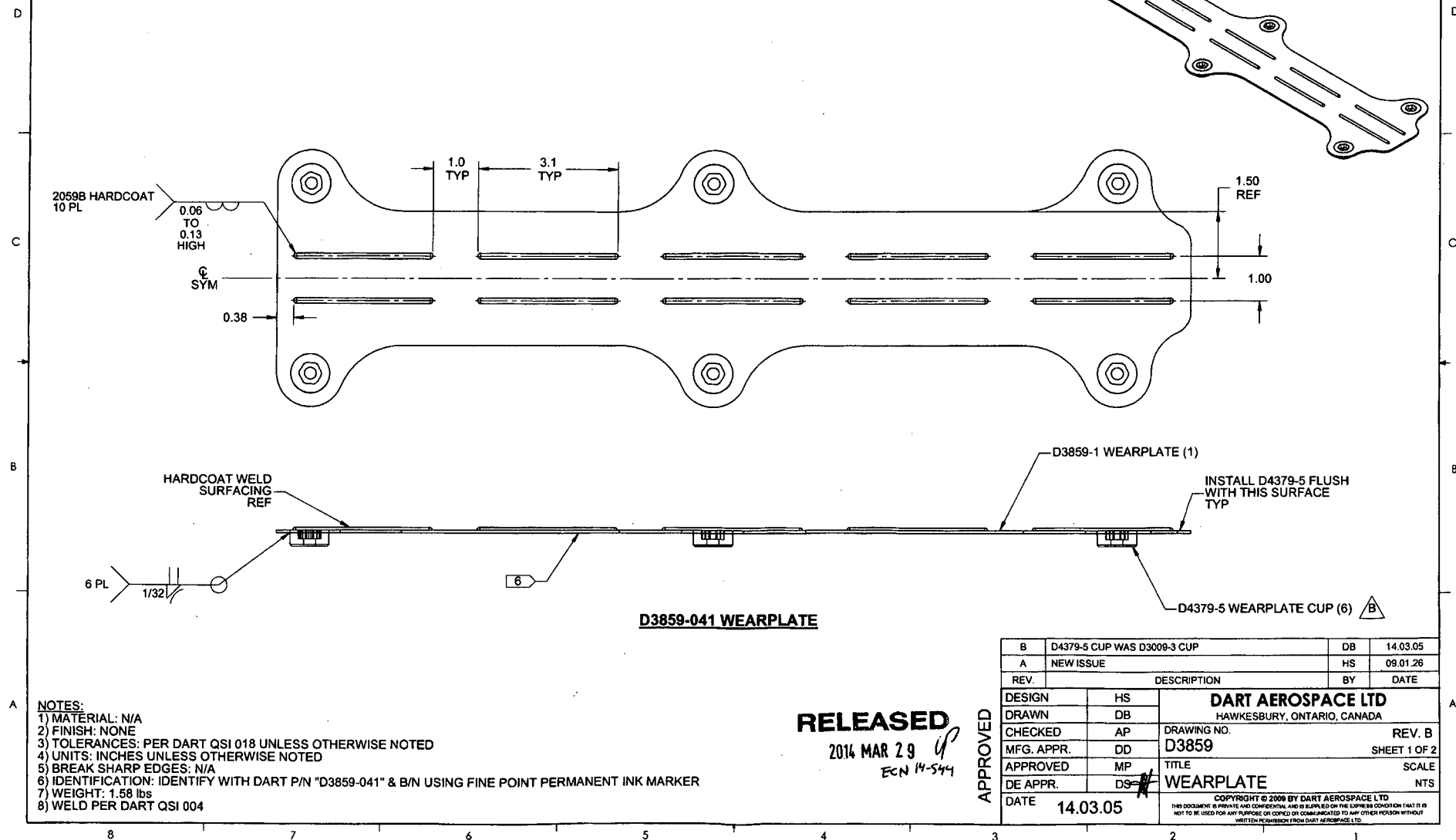
M129545

179

3

ITEM NO.	QTY.	P/N	DESCRIPTION
	X	D3859-041	WEARPLATE
1	1	D3859-1	WEARPLATE
2	6	D4379-5	WEARPLATE CUP

B



DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: _____ Date: _____

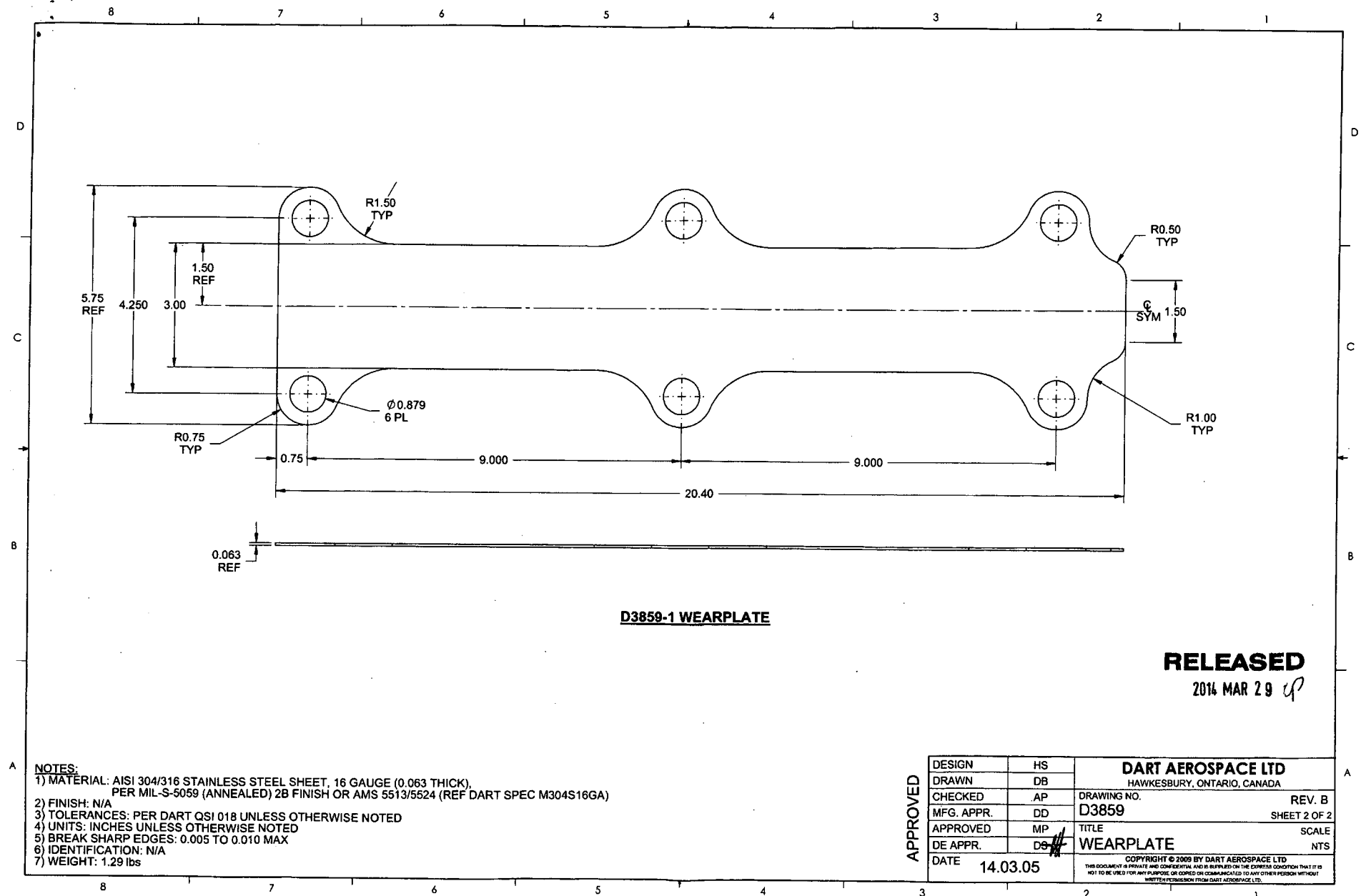
Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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DQA: _____ Date: _____



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